2016 AUG 22 AM 7: 20

A Better Elizabeth PO BOX 409 Harrison, NJ 07029

Federal Election Commission 99 E Street NW Washington, DC 20463

RE: Form 1, Statement of Organization - Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Colombia Circuit's decision in Speechnow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications to federal candidates or committees.

Respectfully Submitted,

Ganni Donates Freasurer

## 2016 · 08 · 22 · 08 · 00095704

FEC FORM 1

## STATEMENT OF ORGANIZATION

FEG MAIL CENTER

2016 AUGIRE 2Use POINT 7: 20

<b></b>				TO HOW	office Use Cirily 7: 20
NAME OF COMMITTEE (in full)		Check if name s changed)	Example:If typing, type over the lines.	12FE4M5	
A BETTER ELIZABETH	<b>I</b>				
		<del></del>	<del> </del>	<u>.</u>	
ADDRESS (number and street)	PO BO	)X 409 			
(Check if address	1.,				1
is changed)	HARR	ISON		NJ 10'	7029
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		)		SIRIE	ZIF CODE A
COMMITTEE'S E-MAIL ADDRES	SS				
☐ ◀ (Check if address is changed)	ADMI	N@COMPLIA	NCEMETHODS.COM	1 1 1 1 1 1	
	Optional	Second E-Mail Add	lress		
		•			
COMMITTEE'S WEB PAGE ADD	DRESS (II	RI )		•	
(Check if address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,
is changed)					
	1 , ,				· 
2. DATE 08 15	20	016			
3. FEC IDENTIFICATION NU	JMBER )	C			
4. IS THIS STATEMENT		(N) OR	AMENDED (A)		
I certify that I have examined th	is Ctataan			A :- A	d consists
r certify that i have examined th	is Stateme	en and to the best	or my knowledge and belief i	t is true, correct an	a complete.
Type or Print Name of Treasure	GYX	NN TONATES	S		•
Signature of Treasurer	kuft	wolf	· · · · · · · · · · · · · · · · · · ·	Date 08	2016
NOTE: Submission of false, errone			may subject the person signing ON SHOULD BE REPORTED \		e penalties of 2 U.S.C. §437g.
Office Use			For further information Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

FEC F	Form 1 (Revised 02/2009)	Page 2
	COMMITTEE te Committee:	
n		
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	plete the candidate
Name of Candidate		_;
Candidate Party Affilia	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	ommittee:	
(d)		(Democratic, Republican, etc.) Party.
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected organization is a:
lbms2	Corporation Corporation w/o Capital Stock	Labor Organization
	<b>7m3</b> (F3) (F3)	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fur	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h) 🗍	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Со	mmittees Participating in Joint Fundraiser	
1,	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revise	d 02/2009)	· Page <b>3</b>
Write or Type Committee Na		
6. Name of Any Connected NONE	d Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: le books and records.</li> </ol>	dentify by name, address (phone number optional) and position of the person	in possession of committee
GIAN	INI DONATES	
Mailing Address	PO BOX 409	
	HARRISON NJ 0	7029
Title or Position	CITY STATE	ZIP CODE
TREASURER	Telephone number 908	- [5]7,
Treasurer: List the name any designated agent (e.g.)	and address (phone number optional) of the treasurer of the committee; and to, assistant treasurer).	he name and address of
Full Name GIAN of Treasurer	NI DONATES	·
Mailing Address	PO BOX 409	
	HARRISON NJ 0'	7029 ZIP CODE
Title or Position TREASURER	Telephone number	- [517] - [8884]

CITY

STATE

ZIP CODE

Page 4

FEC Form 1 (Revised 02/2009)

Full Name of Designated

22-03-00095708 2504 NV 57629

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMI The FEC added this page to the end of this filing to indic	
Lland Dalinand	Date of Receipt
Hand Delivered	
Postmarked	Date of Receipt
USPS First Class Mail  Aug 16,2016	Aug 32, 2010
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
·	
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Bus	iness Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	of Receipt or Postmarked
Bews	Aug De, Doll
PREPARER (2/2015)	DATE PREPARED
(3/2015)	